

ISSUE SLIP STAPLE AREA (for additional cross references)

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mg</i>		11/24/99
O.I.P.E. CLASSIFIER		19	11/30/99
FORMALITY REVIEW	<i>LA</i>	63390	12/8/99

RFR

LA

INDEX OF CLAIMS

63390

2/8/00

✓ Rejected
 = Allowed
 (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date									
Final	Original	10/10/99	10/11/99	10/12/99	10/13/99	10/14/99	10/15/99	10/16/99	10/17/99	10/18/99
1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
2	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
3	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
5	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
6	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
7	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
8	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
9	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
10	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
11	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
12	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
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15	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
16	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
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Claim	Date									
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Claim	Date									
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If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)